DEC 12 1989

CERTIFIED MAIL RETURN RECEIPT REQUESTED

Ms. Cindy Turkel Scott County Landfill P. O. Box 563 Buffalo, Iowa 52728

Dear Ms. Turkel:

Enclosed is a copy of the Data Reporting/ Qualifications Code sheet, field sheet, and the analytical results for the well sample taken from your property at the time of the inspection of the Umthun Trucking site. The sample was collected during May 1989 by Ecology and Environment, a contractor for the U.S. Environmental Protection Agency (EPA).

Iron was detected in the sample taken from your water supply at a level above its Secondary Drinking Water Maximum Contaminant Levels of 300 micrograms per liter (ug/l). Secondary Drinking Water Standards have been established based on aesthetic considerations, such as taste, odor, and discoloration of plumbing fixtures.

If you would like additional information, or help in answering questions regarding consumption of this water, I suggest that you contact:

> Mr. Dennis Alt Bureau of Surface and Ground Water Protection Iowa Department of Natural Resources Henry A. Wallace Building 900 East Grand Des Moines, Iowa 50319

This information is forwarded to you in accordance with the provisions of Section 3007(a) of the Resource Conservation and Recovery Act of 1976 (RCRA) as amended, and Section 104(e)(4)

WSTM: SPFD: PREP: CULVER: final: bh: 11/28/89: Disk #4: umthscot.dat PREP

(515) 281-8998

CULVER

ATSDR HARPER

Phone:

PREP

DRNK WAR

SPFD

of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (CERCLA) as amended. If you have any questions regarding these analytical data, please contact Pete Culver of my staff at (913) 236-2856.

Sincerely yours,

Robert L. Morby Chief, Superfund Branch Waste Management Division

Enclosure

Pete Hamlin, IDNR (with enclosure)

Darrell McAllister, IDNR (with enclosure)

Ralph Langemeier, WATR (w/enclosure)
Craig Smith, IOWA/RCRA (w/enclosure)

DATA REPORTING / QUALIFICATION CODES

- U The material was analyzed for, but was not detected. The associated numerical value is the sample detection limit.
- J The associated numerical value is an estimated quantity (explanation attached).
- I The data are invalid (compound may or may not be present). Resampling and/or reanalysis is necessary for verification.
- N Sample not analyzed.

CODES FOR FLASH POINT DATA

- L The sample did not ignite or "flash". This is the highest temperature at which the sample was tested. It is possible that the material may be ignitable at higher temperatures.
- K The sample did ignite or "flash" at the lowest temperature tested. This is usually the ambient temperature at the time of the test. It is possible that the material may be ignitable at even lower temperatures.

FIELD SHEET U.S. ENVIRONMENTAL PROTECTION AGENCY, REGION VII ENVIRONMENTAL SERVICES DIV. 25 FUNSTON RD. KANSAS CITY, KS 66115

: Site Name: UMTHUN TRUCKING Site Number: : Location: BUFFALO IA Site Code:	:			
: Collected: YR: 89 MO: 5 Day: 13 Time: 1406 Leader: WES MCCALL : Sample Number: DC943065 SMO #: : Sample Media (circle one): : SOIL, DUST, RINSATE, SEDIMENT, WATER, OTHER: : Sample Split (circle one): YES	:::::::::::::::::::::::::::::::::::::::			
Sample Container: Tag Color: Preservative: Analysis Requested CUBITAINER: HN03/4 C: TOTAL METALS CODITAINER: 4 C: SULFATE 1 GAL.AMBER: 4 C: CHLORIDE Depth: 335' Fan #: Aliquots: Samplers: G. Huss				
Site Description: Scott Co. Landfill Well pH = 7.67 Cond. = 500 mm hos Temp.= 13°C				

ANALYSIS TYPE: METALS, TOTAL

UNITS: UG/L MATRIX: WATER TITLE: UMTHUM TRUCKING CASE: 12127 METHOD: 9001W71 LAB: NANCO DATE: 08/25/89 SAMPLE PREP:

ANALYST/ENTRY: PLC REVIEWER: DATA FILE : P55 REVIEW LEVEL: 2

	DC943005
	200 U
**	60 U
	10 U
	110 J
	5.0 T
	5.0 U
	88000
	10 U
lo lo	50 U
	25 U
	1800
	6.1 U
	34000
	10 J
	0.20 U
	40 U
	1600 J
	5.0 U
•	10 U
	19000
	10 U
	50 U
	800
	N

ANALYSIS TYPE: SULFATE BY ANION SCAN

TITLE: UMTHUM TRUCKING

MATRIX: WATER

UNITS: MG/L

LAB: SILVER VALLEY

SAMPLE PREP: ____ ANALYST/ENTRY: PLC REVIEWER: ____X
REVIEW LEVEL: 2 DATA FILE : P83

METHOD: 3001W00

CASE: 4740G

DATE: 08/03/89

SAMPLE NO.

RESULT

DC943005

20.2

ANALYSIS TYPE: CHLORIDE BY ANION SCAN

TITLE: UMTHUM TRUCKING

MATRIX: WATER

UNITS: MG/L

LAB: SILVER VALLEY

METHOD: 3001W00

CASE: 4740G

ANALYST/ENTRY: PLC REVIEWER: DATA FILE : P82

DATE: 08/03/89

SAMPLE PREP: REVIEW LEVEL: 2

SAMPLE NO.

RESULT

DC943005

0.55

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address, and ZIP Code in the space below.

 Complete items 1, 2, 3, and 4 on the reverse.

 Attach to front of article if space permits, otherwise affix to back of article.

 Endorse article "Return Receipt Requested" adjacent to number.





USE, \$300

RETURN TO



Print Sender's name, address, and ZIP Code in the space below.

Bandaponmental Protection Agency

726 Minuesota Avenue

Kansas City, Kansas 66101

Mulver

SENDER: Complete items 1 and 2 when additional so and 4. Put your address in the "RETURN TO" Space on the reverse card from being returned to you. The return receipt feed elivered to and the date of delivery. For additional fees the postmaster for fees and check box(es) for additional service(1. ** Show to whom delivered, date, and addressee's address	rse side. Failure to do this will prevent this will provide you the name of the person he following services are available. Consult s) requested.
3. Article Addressed to:	4. Article Number P 716 386 087
Ms. Cindy Turkel	Type of Service:
Scott County Landfill	☐ Registered ☐ Insured
P.O. Box 563	☐ COD ☐ COD
Buffalo, Iowa 52728	☐ Express Mail
	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature - Addressee Xurklo	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent	
X	
7. Date of Delivery	
PS Form 3811, Mar. 1987 * U.S.G.P.O. 1987-178-268	DOMESTIC RETURN RECEIPT

P 716 386 087 RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

Sent to Fis. Cindy Turkel				
Secret Nounty Landfill				
P.O. Box 563	<u> </u>	<u>:</u>		
Buffallog zilówa 5272	28	3		
Poslage	S :	1		
Certified Fee	3. - 4 \$	à.		
Special Delivery Fee		:		
Restricted Delivery Fee		- 11		
Return Receipt showing to whom and Date Delivered				
Return Receipt showing to whom, Date, and Address of Delivery		à		
TOTAL Postage and Fees	S			
Postmark or Date				

rm 3800, June 1985

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE, CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)

- 1. If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your rural carrier. (no extra charge)
- 2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.
- 3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article RETURN RECEIPT REQUESTED adjacent to the number.
- 4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse RESTRICTED DELIVERY on the front of the article.
- 5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.
- 6. Save this receipt and present it if you make inquiry.